Case 18-10769-mdc Doc 15 Filed 04/09/18 Entered 04/09/18 17:23:23 Desc Main Document Page 1 of 3

Fill in this inforr	nation to identify	y your case:			
Debtor 1	Nicholas First Name	B. Middle Name	DeWald Last Name	_	
	riisi name	Middle Name	Last Name	Che	eck if this is:
Debtor 2				— 团	An amended filing
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the:		EASTERN DIST. OF PENNSYLVANIA		🗆	A supplement showing postpetition chapter 13 income as of the following date:
Case number	18-10769				onapter to moonie as of the following date.
(if known)					MM / DD / YYYY
					,,

Official Form 106I

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1:	Describe	Fmnlo	/ment
raiti.	Describe	Lilibio	y i i i C i i t

۱.	Fill in your employment information.		Debtor 1		Debtor 2 or non-filing	spouse
If you have more than one job, attach a separate page with information about		Employment status	✓ Employed☐ Not employed		Employed Not employed	
	additional employers.	Occupation	Self- Employed			
	Include part-time, seasonal, or self-employed work.	Employer's name	Contract Employee	e for Grubhub/ Uk		
	Occupation may include	Employer's address	9921 Bustleton Av	e, R3		
	student or homemaker, if it applies.		Number Street		Number Street	
				PA 19115		
			City	State Zip Code	City	State Zip Code
		How long employed th	nere? 15 months			

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

			For Debtor 1	non-filing spouse
2.	List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.	2.	\$0.00	
3.	Estimate and list monthly overtime pay.	3. 4	\$0.00	
4.	Calculate gross income. Add line 2 + line 3.	4.	\$0.00	

Official Form 106l Schedule I: Your Income page 1

Deb	tor 1	Nicholas B. DeWald		Case num	ıber	r (if knov	vn) <u>18</u>	3-10	769	
				For Debtor 1		or Debt on-filing		<u>e_</u>		
	Сор	by line 4 here	4.	\$0.00						
5.		all payroll deductions:		00.00						
		Tax, Medicare, and Social Security deductions	5a.	\$0.00 \$0.00						
		Mandatory contributions for retirement plans	5b. 5c.	\$0.00						
		Voluntary contributions for retirement plans Required repayments of retirement fund loans	5d.	\$0.00						
		Insurance	5e.	\$0.00						
	5f.	Domestic support obligations	5f.	\$0.00						
	5g.		5g.	\$0.00						
	_	Other deductions.	og.		•					
		Specify:	5h. -	÷\$0.00						
6.		I the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5h.	6.	\$0.00						
7.	Cald	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$0.00						
8.		all other income regularly received:								
	ва.	Net income from rental property and from operating a business, profession, or farm	8a.	\$1,964.00	•					
		Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.								
	8b.	Interest and dividends	8b.	\$0.00						
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive	8c.	\$0.00	×					
		Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.								
	8d.	Unemployment compensation	8d.	\$0.00						
	8e.	Social Security	8e.	\$0.00	•					
	8f.	Other government assistance that you regularly receive								
		Include cash assistance and the value (if known) or any non- cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.								
		Specify:	8f.	\$0.00						
	8g.	Pension or retirement income	- 8g.	\$0.00						
	8h.	Other monthly income.			•					
		Specify:	8h	+ <u>\$0.00</u>						
9.	Add	I all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.	9.	\$1,964.00						
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$1,964.00	٠[=	\$1,964.00)
11.		te all other regular contributions to the expenses that you list in S								
	Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.									
	Do r	not include any amounts already included in lines 2-10 or amounts tha	t are r	not available to pay e	хре	nses lis	ted in S	chec	lule J.	
	Spe	cify:					11.	+	\$0.00	<u>)</u>
12.		I the amount in the last column of line 10 to the amount in line 11.					12.		\$1,964.00	 <u>)</u> _
		ome. Write that amount on the Summary of Your Assets and Liabilities applies.	s and (ьегтаіп Statistical Info	rmر	iation,			Combined monthly incom	e
13.	Doy	you expect an increase or decrease within the year after you file t	his fo	rm?						
		No. Yes. Explain: None.								

Debtor 1 Nichola	as B. DeWald		Case number (if known)	18-10769
8a. Attached Stateme	ent (Debtor 1)			
		Income from Grubhub and U	ber	
Gross Monthly Inc	come:			\$3,040.00
Expense		Category	Amount	
Vehicle Lease		Auto Payments	\$276.00	
Taxes		Taxes	\$500.00	
Gas/ Fuel		Gasoline	\$300.00	
Total Monthly Exp	enses			\$1,076.00
Net Monthly Incom	ne:			\$1,964.00

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